

**County of Sonoma
Information Technology and Security
Policy Manual**

Acknowledgment

I acknowledge that I have received, have been given the opportunity to read and will comply with the County of Sonoma Administrative Policy 9-2 – Information Technology Use and Security Policy Manual, issued on

I understand I have the obligation to know the responsibilities to maintain the security of Local Agency IT resources and data associated with my role(s) as defined in this Policy manual.

I understand that if I voluntarily use my personally owned device to access Local Agency IT resources and data that I will comply with the personally owned section of the Mobile Computing Policy section on page 19.

I further, acknowledge that my use of Local Agency IT resources and data may be monitored, and that I have no expectation of privacy when using Local Agency IT resources or in any data I access, create, store, send or receive on any Local Agency IT resources.

Print Name

Signature

Local Agency

Date